

ISSUE SLIP STAPLE AREA (for additional cross references)

Cancel 027

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
U.I.P.E. CLASSIFIER	<i>h</i>		4/7/01
FORMALITY REVIEW	<i>SP</i>	1027	04/19/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral) Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Final	Original	Date
1	✓	✓	1/23/01
2	✓	✓	
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
9	✓	✓	
10	✓	✓	
11	✓	✓	
12	✓	✓	
13	✓	✓	
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47	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	1/23/01
52	✓	✓	
53	✓	✓	
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99	✓	✓	
100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	1/23/01
102	✓	✓	
103	✓	✓	
104	✓	✓	
105	✓	✓	
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148	✓	✓	
149	✓	✓	
150	✓	✓	

BEST AVAILABLE COPY

C.C.
 04/19/01
 Res
 20-612
 74001
 2339-850
 10-22-01
 If more than 150 claims or 10 actions
 staple additional sheet here
 (LEFT INSIDE)